

# **APPLICATION DATA SHEET**

## **Application Information**

<b>Application Number::</b>	Not Yet Assigned
<b>Filing Date::</b>	September 10, 2003
<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested Classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	
<b>Number of CD Disks::</b>	
<b>Number of Copies of CDs::</b>	
<b>Sequence Submission?::</b>	
<b>Computer Readable Form (CFR)?::</b>	
<b>Number of Copies of CFR::</b>	
<b>Title::</b>	CIRCUIT BREAKER FOR A DUAL-CIRCUIT
<b>Attorney Docket Number::</b>	33144-192883
<b>Request for Early Publication?::</b>	
<b>Request for Non-Publication?::</b>	
<b>Suggested Drawing Figure::</b>	Figs. 1-7
<b>Total Drawing Sheets::</b>	7
<b>Small Entity?::</b>	Yes
<b>Latin Name::</b>	
<b>Variety Denomination Name::</b>	
<b>Petition Included?::</b>	
<b>Petition Type::</b>	
<b>Licensed US Govt. Agency::</b>	
<b>Contract or Grant Numbers::</b>	
<b>Secrecy Order in Parent Appl.::</b>	

## **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Taiwan, R.O.C.  
**Country::** Taiwan, R.O.C.  
**Status::** Full Capacity  
**Given Name::** Albert  
**Middle Name::**  
**Family Name::** HUANG  
**Name Suffix::**  
**City of Residence::** Taipei  
**State or Province of Residence::**  
**Country of Residence::** Taiwan, R.O.C.  
**Street of Mailing Address::** 3F, No. 146, Sec. 4, Chungking N. Road  
**City of Mailing Address::** Taipei  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Taiwan, R.O.C.  
**Postal or Zip Code of Mailing Address::**

## **Correspondence Information**

**Correspondence Customer Number::** 26694  
**Phone Number::** (202) 962-4800  
**Fax Number::** (202) 962-8300  
**E-Mail Address::** fchao@venable.com

## **Representative Information**

**Representative Customer Number::** 26694

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
N/A	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
N/A			

## Assignee Information

Assignee Name:: N/A

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::